



17W/658

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/026,578	
	Filing Date	December 17, 2001	
	First Named Inventor	Schmidt	
	Group Art Unit	1656	
	Examiner Name	Robinson	
Total Number of Pages in This Submission	18	Attorney Docket Number	10013.0014US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <i>(see "other")</i> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i> - Request for Continued Examination and Amendment - Form 1449
Remarks: <i>Page number excludes pages of references in IDS.</i>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Stout, Uxa, Buyan & Mullins, LLP		
Signature	<i>Carlos A. Fisher</i>		
Printed Name	Carlos A. Fisher		
Date	November 1, 2007	Reg. No.	36,510

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO at fax number 571-273-8300, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature	<i>Shawna Waddell</i>		
Typed or printed name	Shawna Waddell	Date	Nov. 1, 2007

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Fees Pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

Patent fees are subject to annual revision.

☐ Application claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
460.00

Complete if Known

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Art Unit	1656
Attorney Docket No.	10013.0014US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number 50-4004 Deposit Account Name Carlos A. Fisher

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) associated with this communication ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
Subtotal (1)							

2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	210	105
Multiple Dependent Claims	370	185
Total Claims	Extra Claims	Fee (\$)
-20 or HP =	x	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee (\$)
-3 or HP =	x	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3		
Subtotal (2)		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50=	(round up to a whole number)	x	=
Subtotal (3)				

4. OTHER FEE(S)

<input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)	
<input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)	
<input type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)	
<input checked="" type="checkbox"/> 2-month extension of time: \$460 fee (\$230 small entity discount)	460
<input type="checkbox"/> 3-month extension of time: \$1050 fee (\$525 small entity discount)	
<input type="checkbox"/> 4-month extension of time: \$1640 fee (\$820 small entity discount)	
<input type="checkbox"/> 5-month extension of time: \$2230 fee (\$1115 small entity discount)	
<input type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)	
<input type="checkbox"/> Notice of Appeal: \$510 fee (\$255 small entity discount)	
<input type="checkbox"/> Filing a Brief in Support of Appeal: \$510 fee (\$255 small entity discount)	
<input type="checkbox"/> Request for Oral Hearing: \$1030 fee (\$515 small entity discount)	
<input type="checkbox"/> Utility Issue Fee: \$1440 fee (\$720 small entity discount)	
<input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)	
<input type="checkbox"/> Request for Continued Examination: \$810 fee (\$405 small entity discount)	
<input type="checkbox"/> Other: _____	
Subtotal (4)	

SUBMITTED BY

Name (Print/Type)	Carlos A. Fisher	Registration No. (Attorney/Agent)	36,510	Telephone	949-450-1750
Signature				Date	Nov. 1, 2007